Increasing HIV Infections Among MSM Of Color: An Epidemiological Assessment

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Abstract

The human immunodeficiency virus (HIV) epidemic remains a critical health issue for men who have sex with men (MSM), but the situation is even grave for MSM of color. Therefore, this short communication examines and re-assesses the Centers for Disease Control and Prevention (CDC) HIV/AIDS surveillance data to highlight the extent of the impact of this HIV epidemic on MSM of color and calls for urgent policy action to minimize the spread of the virus among MSM of color.

HIV/AIDS TRENDS, 1995-2000

Despite men of color accounting for about a fourth (25%) of the 2000 male population [1,2], MSM of color accounted for nearly half of all MSM-acquired AIDS (48%) and HIV (45%) cases reported to CDC in 2000, representing an HIV/AIDS impact that is nearly 2 times their proportion of the male population. The proportion of all AIDS cases attributed to MSM declined from 42% in 1995 to 32% in 2000. Similar downward trends were observed for the proportion of the total HIV cases attributed to MSM, slightly declining from 30% to 29% during the same period. Among males HIV/AIDS cases, similar trend was observed for the proportion of the AIDS cases (from 51% to 43%) but not the HIV cases which show a slight increase (from 42% to 43%). Despite such relatively declining trends, MSM of color were disproportionately affected relative to White MSM. Although White MSM accounted for a majority of the number of MSM cases, their proportion of the MSMacquired HIV (57% to 55%) and AIDS (61% to 52%) cases declined from 1995-2000 [See Table 1].

Figure 1

Table 1: Proportion of U.S. Male Population* and MSM-Acquired HIV/AIDS Cases, and Annual MSM-SPECIFIC AIDS Rates per 100,000 Population, 1995-2000**

Race/Gender	Male Population		MSM AIDS Cases	
	1995	2000	1995	2000
White Men	76%	75%	61%	52%
Men of Color	24%	25%	39%	48%

Race/Gender	MSM HIV Cases		MSM AIDS Rates	
	1995	2000	1995	2000
White Men	57%	55%	24.0	6.8
Men of Color	43%	45%	49.9	24.1

* 1995-2000 U.S. Male Population, US Census Bureau, www.census.gov

**HIV/AIDS Surveillance Report, US Department of Health and Human Services, Public Health Service, CDC, Atlanta, GA. 1995-2000. Vol. 8-12, No. 1-2

On the contrary, the proportion attributed to MSM of color increased. While men of color accounted for a fourth (25%) of the US male population, their proportion of the MSMacquired HIV (43% to 45%) and AIDS (39% to 48%) cases increased during the same period [See Table 1]. In addition, African American MSM accounted for the greatest proportion of the increase for MSM-acquired AIDS cases (from 23% to 29%), while Latino MSM accounted for the greatest proportion of the increase for MSM-acquired HIV cases (from 4% to 14%) among men of all racial/ethnic groups.

For MSM-specific AIDS rates, MSM of color AIDS rate (49.5 per 100,000 men) was about 2 times greater than that of White MSM (24.0) in 1995 [See Table 1]. In addition, African American MSM had the highest AIDS rate (63.5) among men of all racial/ethnic groups, which was about 2.6 times greater than that of White MSM (24.0), and Latino MSM AIDS rate (44.3) was nearly 2 times greater than that of White MSM of color AIDS rate (18.9) was nearly 3 times greater than that of White MSM had the highest MSM (6.8) [See Table 1]. Again, African American MSM had the highest MSM AIDS rate (24.1), which was nearly 4 times greater than that of White MSM (6.8), and Latino MSM AIDS rate (12.3) was almost 2 times greater than that of White MSM.

CONCLUSIONS

MSM-acquired AIDS cases declined from 1995-2000 among men of all racial/ethnic groups. Yet, the decline was relatively greater for White MSM as compared to MSM of color, while African American MSM accounted for the least decline. In addition, the proportion of MSM-acquired cases attributed to MSM of color also increased during the same period. On the contrary, the number of MSM-acquired HIV cases increased by nearly a third from 1995-2000. Yet, the increase was greater for MSM of color as compared to White MSM. Among men of all racial/ethnic groups, the increase was significantly greater for Latino MSM. Also, the proportion of MSM-acquired HIV cases attributed to MSM of color increased during the same period.

The HIV/AIDS surveillance data clearly demonstrated that MSM of color are disproportionately impacted relative to their proportion of the U.S. male population. Significantly, trend analyses of the surveillance data from 1995-2000 clearly documented an increase in MSM-acquired HIV cases, especially among MSM of color. As such, accelerated public health efforts must be directed at curbing the epidemic among people of color. Furthermore, coordinated and sustained efforts are also required to accelerate the downward AIDS trends, especially for White MSM.

References

 HIV/AIDS Surveillance Reports, U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, Atlanta, GA. 1995-2000;8-12:1-2.
U.S. Census Bureau, http://www.census.gov

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